



Health Record and Payment Integration Program Advisory Committee

2018 Prompt Payment of Claims

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Maryland Insurance Administration

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- § 15-1005 of Insurance Article
- Applies to:
 - Individuals
 - Insurers
 - Non-Profit Health Service Plans
 - HMOs
 - MCOs
 - Carriers acting as TPA's for Employer Plan Sponsors
- COMAR 31.10.11 – Uniform Claims Forms
 - Claims filed by providers, hospitals, other institutions (COMAR only)

Requirements Generally

- Pay undisputed/clean claims within 30 days of receipt
- If not paid on time must pay interest on unpaid portion of claim (§15-1005(g))
- If not paid because claim is not “clean,” notice must be sent stating reason for refusal to pay and what specific information is still needed (§15-1005(c)(2))

- Claims can be submitted up to a minimum of 180 days from date of service
 - Period can be longer by contract
- Uniform Claim forms must be used by providers
 - Standardized Transactions + Code Sets
 - HCFA Form 1500 (Hospitals/inpatient)
 - HCFA Form UB-92 (individual doctors/practices, etc.)